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Bib Data Sheet

CONFIRMATION NO. 6720

|                             |  |              |                        |                                      |
|-----------------------------|--|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/009,990 | FILING OR 371(c)<br>DATE<br>06/30/2003<br>RULE | CLASS<br>128 | GROUP ART UNIT<br>3761 | ATTORNEY<br>DOCKET NO.<br>NIDN-73132 |
|-----------------------------|--|--------------|------------------------|--------------------------------------|

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/GB00/02226 06/08/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

|                                 |   |                        |                     |                    |                         |
|---------------------------------|---|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>PA | SHEETS DRAWING<br>6 | TOTAL CLAIMS<br>19 | INDEPENDENT CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                     |                    |                         |
| Verified and Acknowledged       | Examiner's Signature  | Initials               |                     |                    |                         |

## ADDRESS

22840

## TITLE

Ventilation system

|                             |   |  |
|-----------------------------|---|--|
| FILING FEE RECEIVED<br>1020 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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|                             |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
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